

**Procter & Gamble – I.P. Division**

1771 /

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**FACSIMILE TRANSMITTAL SHEET AND  
CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8**

**TO: Commissioner for Patents**  
**The U.S. Patent and Trademark Office**  
**Examiner: Lynda Salvatore**

Fax No. (703) 872-9306  
Phone No. (571) 272-1482

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FEB 25 2004

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*I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on February 25, 2004, to the above-identified facsimile number.*

Cheryl L. Martin (Signature)

**FROM: Cheryl L. Martin**  
Fax No. (513) 626-3499  
Phone No. (513) 626-1120

Listed below are the item(s) being submitted with this Certificate of Transmission:\*\*

- 1) Auto-Reply Facsimile Transmission Sheet
- 2) Comm. Journal Sheet showing fax received
- 3) Facsimile Sheet dated 11/14/03
- 4) Response/Amendment Transmittal Sheet  
dated November 14, 2003 (original + 1 copy)
- 5) Response dated November 14, 2003  
(14 pages)

Number of Pages Including this Page: 20

Inventor(s): Hendrix et al.

S.N.: 10/083,050

Confirmation No.: 3129

Filed: February 26, 2002

Case: 8439M

Comments: Following up my phone conversation with Examiner Salvatore, I am hereby re-submitting the response that was faxed November 14, 2003, by Mr. Robinson.

\*\*Note: Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.

# Auto-Reply Facsimile Transmission



TO:

Fax Sender at 5136263499

Fax Information

Date Received:

11/14/2003 10:07:48 AM [Eastern Standard Time]

Total Pages:

17 (including cover page)

**ADVISORY:** This is an automatically generated return receipt confirmation of the facsimile transmission received by the Office. Please check to make sure that the number of pages listed as received in Total Pages above matches what was intended to be sent. Applicants are advised to retain this receipt in the unlikely event that proof of this facsimile transmission is necessary. Applicants are also advised to use the certificate of facsimile transmission procedures set forth in 37 CFR 1.8(a) and (b), 37 CFR 1.6(f). Trademark Applicants, also see the Trademark Manual of Examining Procedure (TMEP) section 306 et seq.

Received  
Cover  
Page

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NOV-14-2003 10:12 PROCTER&GAMBLE 5136263499 P.01/17
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<b>FACSIMILE TRANSMITTAL SHEET AND CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8</b>
<b>TO:</b> Commissioner for Patents The U.S. Patent and Trademark Office Examiner: Lynda Salvatore  Fax No. (703) 872-8310 Phone No. (703) 905-4070
I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on November 14, 2003, to the above-identified facsimile number  <div style="text-align: right;">             (Signature)         </div>
<b>FROM:</b> Ian S. Robinson Fax No. (513) 628-3499 Phone No. (513) 628-3356
Listed below are the item(s) being submitted with this Certificate of Transmission:
1) Response/Amendment Transmittal Sheet (original + 1 copy) 2) Response (14 pages)
Number of Pages including this Page: 17
<b>Comments:</b>
**Note: Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.
Inventor(s): Hendrix et al. S.N.: 10/083,050 Confirmation No.: 3129 Filed: February 26, 2002 Case: 0439M
PAGE 1/17 * RCVD AT 11/14/2003 10:07:48 AM [Eastern Standard Time] * SVR:USPTO-EFXXF-1/1 * DNIS:8729306 * CSID:5136263499 * DURATION (mm-ss):04-28

MODE = MEMORY TRANSMISSION

START=NOV-14 10:11

END=NOV-14 10:16

FILE NO. = 031

NO.	COM	ABBR/NTWK	STATION NAME/ TELEPHONE NO.	PAGES	PRG.NO.	PROGRAM NAME
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\*\*\*\*\* -IP DIVISION

- \*\*\*\*\*

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**FACSIMILE TRANSMITTAL SHEET AND  
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**TO: Commissioner for Patents  
The U.S. Patent and Trademark Office  
Examiner: Lynda Salvatore**

Fax No. (703) 872-9310  
Phone No. (703) 305-4070

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on November 14, 2003, to the above-identified facsimile number.

Ian Robinson (Signature)

**FROM: Ian S. Robinson**  
Fax No. (513) 626-3499  
Phone No. (513) 626-3356

Listed below are the item(s) being submitted with this Certificate of Transmission:\*\*

- 1) Response/Amendment Transmittal Sheet  
(original + 1 copy)
- 2) Response (14 pages)

Number of Pages Including this Page: 17

Comments:

Inventor(s): Hendrix et al.

S.N.: 10/083,050

Confirmation No.: 3129

Filed: February 26, 2002

Case: 8439M

\*\*Note: Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.

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**TO: Commissioner for Patents**  
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**Examiner: Lynda Salvatore**

Fax No. (703) 872-9310  
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*Ian Robinson* (Signature)

**FROM: Ian S. Robinson**  
Fax No. (513) 626-3499  
Phone No. (513) 626-3356

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- 1) Response/Amendment Transmittal Sheet  
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Number of Pages Including this Page: 17

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Inventor(s): Hendrix et al.  
S.N.: 10/083,050  
Confirmation No.: 3129  
Filed: February 26, 2002  
Case: 8439M

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Mail Stop Non-Fee Amendment  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

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FEB 25 2004

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Dear Sir:

Transmitted herewith is an AMENDMENT for the patent application:

Application No. : 10/083,050  
Applicant(s) : Hendrix, et al.  
Filed : February 26, 2002  
Title : Premoistened wipe with improved feel and softness  
TC/A.U. : 1771  
Examiner : L. Salvatore  
Conf. No. : 3129  
Docket No. : 8439M  
Customer No. : 27752

1. ☒ No additional fees (claims fees or extension fees) are known to be required.
2. ☐ The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA*	RATE	FEE
TOTAL	* 20	MINUS	** 20	=	x \$18 =	\$
INDEP.	* 3	MINUS	*** 3	=	x \$86 =	\$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$290 =	\$
					TOTAL	\$

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the highest number of total claims previously paid for is less than 20, write "20" in this space.

\*\*\* If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

3. ☐ The Commissioner is hereby petitioned under 37 CFR §1.136(a) to grant any extension of time needed for timely response to the Office Action dated in the above-identified application to preserve pendency of said application. The processing fee under 37 CFR §1.17 has been determined as follows: \$ for a -month extension of time.
4. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2480. A duplicate copy of this sheet is attached.
  - a. ☒ Any patent application processing fees under 37 CFR §1.16.
  - b. ☒ Any patent application processing fees under 37 CFR §1.17.
5. The Director is hereby authorized to make any additional copies of this sheet needed to accomplish the purposes provided for herein and to charge any fee for such copies to Deposit Account No. 16-2480.

Date: November 14, 2003  
Customer No. 27752  
(Transamd.doc - last revised 10/14/2003)

Ian Robinson  
Ian S. Robinson  
Attorney for Assignee  
Registration No. 43,348  
Tel. No. (513) 626-3356

## RESPONSE/AMENDMENT

Mail Stop Non-Fee Amendment  
 COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an AMENDMENT for the patent application:

Application No. : 10/083,050  
 Applicant(s) : Hendrix, et al.  
 Filed : February 26, 2002  
 Title : Premoistened wipe with improved feel and softness  
 TC/A.U. : 1771  
 Examiner : L. Salvatore  
 Conf. No. : 3129  
 Docket No. : 8439M  
 Customer No. : 27752

1. ☒ No additional fees (claims fees or extension fees) are known to be required.
2. ☐ The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA*	RATE	FEE
TOTAL	* 20	MINUS	** 20	=	x \$18 =	\$
INDEP.	* 3	MINUS	*** 3	=	x \$86 =	\$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$290 =	\$
					TOTAL	\$

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the highest number of total claims previously paid for is less than 20, write "20" in this space.

\*\*\* If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

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Date: November 14, 2003  
 Customer No. 27752  
 (Transamd.doc - last revised 10/14/2003)

Ian Robinson  
 Ian S. Robinson  
 Attorney for Assignee  
 Registration No. 43,348  
 Tel. No. (513) 626-3356



Appl. No. 10/083,050  
Atty. Docket No. 8439M  
Reply. Dated November 14, 2003  
Reply to Office Action of August. 14, 2003  
Customer No. 27752

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Law Robinson 43,348  
Attorney Name Registration No.  
*Law Robinson*  
Signature of Attorney

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Case 8439M

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of ::  
Stephen Hendrix, et al. :: Confirmation No. 3129  
Serial No. 10/083,050 :: Group Art Unit 1771  
Filed February 26, 2002 :: Examiner L. Salvatore  
For: PRE-MOISTENED WIPE WITH IMPROVED FEEL AND SOFTNESS

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

RESPONSE AND AMENDMENT

Dear Sir:

In response to the Office Action of August 14, 2003, Assignee's Attorney hereby respectfully requests further examination and reconsideration in view of the following amendments and remarks.

In the specification, please amend the specification according to the amendments beginning on page 2 of this paper. A copy of the amended Abstract is supplied on a separate sheet with this response.

In the claims, please amend the claims according to the entire set of pending claims beginning on page 3 of this paper.

Please consider the remarks and arguments beginning on page 7 of this paper.